

ROCKEY, DEPKE, LYONS & KITZINGER, LLC

Sears Tower
Suite 5450
Chicago, IL 60606

Of Counsel
Lewis T. Steadman

RECEIVED
CENTRAL FAX CENTER

Phone (312) 277-2006
Fax (312) 441-0570

SEP 13 2006

FACSIMILE TRANSMISSION

TOTAL PAGES (Including Cover Page) 9 DATE: 9/13
August 11, 2006

Commissioner of Patents and Trademarks
TO: Examiner: Kevin M. Bernatz FROM: Robert J. Depke, Reg. No. 37,607

FAX NO: (571) 273-8300 FAX NO: (312) 441-0570

If you experience any difficulty with this transmission, please call (312) 277-2006 for assistance.

ORIGINAL COPY AND ENCLOSURES

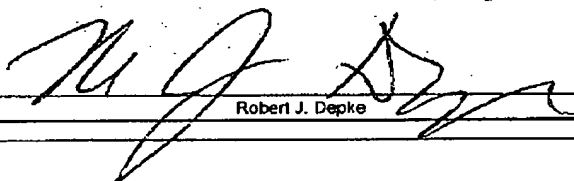
 WILL BE SENT BY MAIL COURIER
 ✓ WILL NOT BE SENT

NOTES:

Inventor: Atsushi Kato
Serial No. : 10/ 714,021
Art Unit: 1773
Filed: November 13, 2002
Attorney Ref.: 075834.00447

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office to facsimile no. 1-571-273-8300 on 9/13/06


Robert J. Depke

IMPORTANT NOTICE

This transmission (including all attached pages) is intended only for the use of the named addressee(s), and may contain information that is privileged or exempt from disclosure under applicable law. **IF YOU ARE NOT A NAMED ADDRESSEE, YOU ARE HEREBY NOTIFIED THAT ANY USE, DISSEMINATION, DISTRIBUTION OR COPYING OF THIS TRANSMISSION IS STRICTLY PROHIBITED.** If you have received this transmission in error, please destroy all copies and notify us immediately at this telephone number: (312) 277-2006.

RECEIVED
CENTRAL FAX CENTER

3124410764

p.2

SEP 13 2006

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10714,021
Filing Date	November 13, 2003
First Named Inventor	Atsushi Kato
Art Unit	1773
Examiner Name	Kevin M. Bernatz
Attorney Docket Number	075834.00447

ENCLOSURES (Check all that apply)

- | | | |
|---|--|---|
| <input type="checkbox"/> Fee Transmittal Form
<input type="checkbox"/> Fee Attached
<input checked="" type="checkbox"/> Amendment/Reply
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Extension of Time Request
<input type="checkbox"/> Express Abandonment Request
<input type="checkbox"/> Information Disclosure Statement

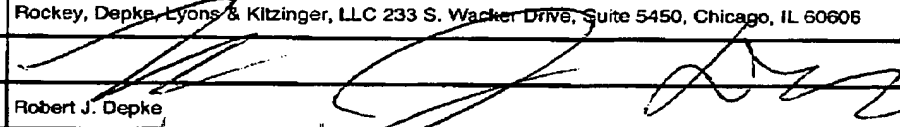
<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Reply to Missing Parts/
Incomplete Application
<input type="checkbox"/> Reply to Missing Parts
under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)
<input type="checkbox"/> Licensing-related Papers
<input type="checkbox"/> Petition
<input type="checkbox"/> Petition to Convert to a
Provisional Application
<input type="checkbox"/> Power of Attorney, Revocation
Change of Correspondence Address
<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Request for Refund
<input type="checkbox"/> CD, Number of CD(s) _____
<input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Appeal Communication to Board
of Appeals and Interferences
<input type="checkbox"/> Appeal Communication to TC
(Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Other Enclosure(s) (please identify
below):
Request for Continued Examination (RCE) |
|---|--|---|

Remarks

The Commissioner is hereby authorized to charge any fees due or credit any overpayment to Deposit account No. 50-3891. A duplicate copy of this sheet is enclosed.

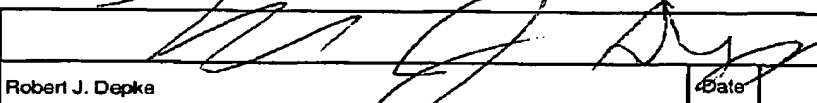
CUSTOMER NO. 33448

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Rockey, Depke, Lyons & Kitzinger, LLC 233 S. Wacker Drive, Suite 5450, Chicago, IL 60606		
Signature			
Printed name	Robert J. Depke		
Date	9/13/06	Reg. No.	37,607

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Robert J. Depke	Date	9/13/06

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.